

WATER WELL REPORT

STATE OF WASHINGTON

Water Right Permit No. _____

Start Card No. 075614

29/3E/33 N

(1) OWNER: Name P. Rodkinson Address 7403 KEENLY N. SEATTLE 98107

(2) LOCATION OF WELL: County ISLAND SW & SW Sec 33 T29 N. R3E W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) 7122 Maxwellton Rd CLINTON WA. 98236

(3) PROPOSED USE: ☒ Domestic ☐ Irrigation ☐ DeWater ☐ Industrial ☐ Test Well ☐ Other ☐ Municipal ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 1
Abandoned ☐ New well ☒ Deepened ☐ Reconditioned ☐ Method: Dug ☐ Cable ☒ Rotary ☐ Bored ☐ Driven ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 93 feet. Depth of completed well 93 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6 Diam. from 0 ft. to 88 ft.
Welded ☒ Liner installed ☐ Threaded ☐ Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____

SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name COOK
Type STAINLESS Model No. _____
Diam. 6 Slot size 12 from 88 ft. to 93 ft.
Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18+ ft.
Material used in seal BENTONITE

Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____
Type: _____ H.P. _____

(8) WATER LEVELS: Land-surface elevation above mean sea level 100- ft.
Static level 73' ft. below top of well Date APR 91
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☐ No ☐ If yes, by whom? _____
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)
Time Water Level Time Water Level Time Water Level

Date of test _____
Bailer test 15 gal./min. with 10 ft. drawdown after 2 hrs.
Airstest _____ gal./min. with stem set at _____ ft. for _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

MATERIAL	FROM	TO
SANDY HARD PAN	0	36
CLAY	36	46
HARD COMPACT SAND	46	70
DIRTY SAND	70	80
WATER SAND	80	93
CLAY	93	

ISLAND COUNTY - well site approved -

RECEIVED

APR 12 1991

DEPARTMENT OF ECOLOGY
NORTHWEST REGION

Work started _____, 19. Completed APR 12, 1991

WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME WHIDBEY DRILLERS (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR WASH 98271

(Signed) [Signature] License No. 129
(WELL DRILLER)

Contractor's Registration No. 285MM Date April 10, 1991

(USE ADDITIONAL SHEETS IF NECESSARY)